## **Application Data Sheet**

## **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

**Suggested Group Art Unit::** 

CD-ROM or CD-R?:: None

Computer Readable Form (CRF)?:: No

Title:: HIGH CHAIR

Attorney Docket Number:: 061270-0902

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 21

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

**Applicant Authority Type::** Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Patrick

Family Name:: NOLAN

City of Residence:: Royersford

State or Province of PA

Residence::

Country of Residence:: US

Street of mailing address:: 2103 Brooke Drive

City of mailing address::

Royersford

State or Province of mailing

PA

address::

Postal or Zip Code of mailing

19468

address::

**Applicant Authority Type::** 

Inventor

**Primary Citizenship Country::** 

US

Status::

**Full Capacity** 

Given Name::

James Murray Forbes

Family Name::

**HUTCHINSON** 

City of Residence::

Mohnton

State or Province of

PA

Residence::

Country of Residence::

US

Street of mailing address::

25 Frog Hollow Lane

City of mailing address::

Mohnton

State or Province of mailing

PA

address::

Postal or Zip Code of mailing

19468

address::

**Applicant Authority Type::** 

Inventor

**Primary Citizenship Country::** 

US

Status::

Full Capacity

Given Name::

William B.

Family Name::

**BELLOWS** 

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State or Province of

PA

Residence::

**Country of Residence::** 

US

Street of mailing address::

1409 Monroe Avenue

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Postal or Zip Code of mailing

19610

address::

**Applicant Authority Type::** 

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Michael L.

Family Name::

LONGENECKER

City of Residence::

**Ephrata** 

State or Province of

PA

Residence::

Country of Residence::

US

Street of mailing address::

15 Allen Road

City of mailing address::

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PA

address::

Postal or Zip Code of mailing

17522

address::

**Applicant Authority Type::** 

Inventor

**Primary Citizenship Country::** 

US

Status::

Full Capacity

Given Name::

Jason A.

Family Name::

CARPENTER

City of Residence::

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PA

Residence::

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Street of mailing address::

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City of mailing address::

Reinholds

State or Province of mailing

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address::

Postal or Zip Code address::	of mailing 17569		
Correspondence Ir	nformation		
Correspondence Customer Number:: E-Mail address::		22428 PTOMailWashington@Foley.com	
Representative Info	ormation		
Representative Cu	stomer 22428	·	
Number::			
Domestic Priority Information			
Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefunder 35 USC 119(e)	60/457,325	03/26/2003
Foreign Priority In	formation		
Country::	Application number::	Filing Date::	Priority Claimed::
Assignee Informat	ion		

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Assignee name::

Graco Children's Products Inc.